Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

1171 139464 A199A -CON

(Column 1) (Column 2)								SMALL ENTITY		OR	OTHER SMALL	
TOTAL CLAIMS			10		, 30,0			RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMB	ER EXTRA	E	BASIC FEE		OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			/ O minus 20=		* ()		F	X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			/ minus 3 =		$^{\star}\mathcal{D}$		ŀ	X42=		OR	X84=	
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT				1	+140=		OR	+280=	
* If	the difference	in column 1 is	less than zero, enter "0" in			column 2	L	TOTAL		, 1	TOTAL	to
CLAIMS AS AMENDED - PART II										,	OTHER	THAN
	•	(Column 1)		(Column 2) (Column 3) HIGHEST				SMALL ENTITY			SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF M	Minus	***	·	=		X42=		OR	X84=	
<u> </u>	FIRST PRESE	INTATION OF M	- DEI	PENDEN	CLAIM			+140=		OR	+280=	
							. L	TOTAL		OR	TOTAL ADDIT, FEE	
	•	(Column 1)	•	(Colu	mn 2)	(Column 3)		DDIT. FEE			ADDII. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	IEST	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	** .		=		X\$ 9=	I.	OR	X\$18=	
	Independent	* NTATION OF M	Minus	***	E CL AIM	=	1 [X42=		OR	X84=	
<u> </u>	I WAST PILEGE	MINITON OF M	OLITEE DE	LINDEIN	CLANV	<u> </u>] [+140=		OR	+280=	
							A	TOTAL DDIT, FEE		OR	TOTAL ADDIT, FEE	
		(Column 1)	_,	(Colu		(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	·	<u> -</u>] [X42=		OΒ	X84=	
Ľ	FIRST PRESE	ULTIPLE DE	PENDEN	T CLAIM		J -			OR			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								+140=		OR	+280=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR	TOTAL ADOIT. FEE	
		nher Previously Pa					or four	ad in the ans	aronriate ho	y im oo	kemo i	